



# PUBLIC HEALTH

## *Connections*

Bureau of Community Health Systems

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## USA MEDDAC Fort Riley Department of Public Health Becomes First U.S. Army Health Department to Achieve National Accreditation Through PHAB

by the Public Health Accreditation Board



Around the nation, public health departments are on the front lines of protecting and improving the health and safety of people and communities. Committed to achieving the highest standards of public health practice, a growing number of health departments are choosing to have their work reviewed against the rigorous national standards of the nonprofit, non-governmental [Public Health Accreditation Board](#) (PHAB).

Recently, PHAB announced it has awarded national accreditation status to nine more health departments. Accreditation formally recognizes that a health department has demonstrated the capacity and commitment to improve the conditions in which the community can be healthy.

The recent decisions herald the attainment of a major milestone for the 10-year-old national accrediting program, as USA MEDDAC Fort Riley Department of Public Health in Fort Riley, Kansas, is the U.S. Army's first public health department to achieve national accreditation. Fort Riley is home to a daytime population of 25,000 people, and the health department's commitment to improving and protecting the health of the people they serve - soldiers, their families, veterans, and the entire extended military community -- is well-represented by their hard work.

"We started as an Army preventive medicine department and transformed into an Army department of public health," said Dr. Donald W. Robinson, COL, FS, the department's Director of Public Health. "Accreditation standards required us not only to rethink how we perform individual tasks, but how to look for new opportunities, how to make a greater health impact on the Fort Riley community, and how to integrate multiple disciplines while collaborating with organizations outside the walls of our installation. It changed us. We now have the awesome responsibility of maintaining public health accreditation standards through research, education, collaboration, and community involvement."

Reflecting on this group of newly accredited health departments, PHAB President and CEO Kaye Bender, PhD, RN, FAAN, said this cohort reflects the diversity of health departments that PHAB seeks to serve.

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## Peer Support Program Now Available for Families with Children with Special Needs

by the Kansas Department of Health and Environment

Families of children with special needs benefit from the care and support that can only be offered by others who have shared their experience. The Kansas Department of Health and Environment (KDHE) and the Special Health Services Family Advisory Council (SHS-FAC) announce the launch of *Supporting You*, a new peer-support initiative in Kansas that will enable individuals and families who have similar experiences to communicate and gain support from one another, by sharing ideas, resources and strategies to meet the needs of their children.

"The program offers participants the opportunity to express their grief, concerns and questions, without feeling judged," said Heather Smith, KDHE Special Health Services Director. "We know that peer support is one of the strongest measures of individual/family support."

Implementation of the network will occur in **three phases**, Support Peer Recruitment, Support Peer Training, and Peer Matching. We are actively recruiting Support Peers—those who has navigated various service systems, have experience with advocating for a loved one or themselves, and have learned lessons that can be shared with others. It does not take specialized training, specific experience with services or systems, or any kind of degree to be a Support Peer. It simply takes a caring individual who has a desire to help others and shares experiences with caring for a child with special health care needs.

In the next phase, Support Peers will provide training on confidentiality, communication, active listening and helping families who are dealing with loss, grief or fear. Training will take place in-person and online through November and December. The final phase, Peer Matching, will take place in early 2019, and begin matching those looking for supports with the trained Support Peers recruited.

Two existing programs are part of the initial launch, the Kansas Special Health Care Needs program and the Kansas School for the Deaf, to connect families of children served through these programs with peer supports.

*Supporting You* will be administered by KDHE's Special Health Services Section, within the Bureau of Family Health. The network has been developed by the SHS-FAC, which will provide oversight to monitor consistent practices and fidelity among partnering organizations, ultimately ensuring that participating programs are meeting the needs of the families served through the network.

More information can be found on the *Supporting You* website at [www.supportingyoukansas.org](http://www.supportingyoukansas.org) or by contacting Heather Smith, Special Health Services Director, at 785-296-4747 or [Heather.Smith@ks.gov](mailto:Heather.Smith@ks.gov).



## USA MEDDAC Fort Riley Department of Public Health Becomes First U.S. Army Health Department to Achieve National Accreditation Through PHAB cont.

"Our accreditation process was developed to be applicable to all types of governmental public health departments, regardless of their organizational structure," Dr. Bender said. "In this group, we are so pleased to see the first U.S. Army local installation's public health department achieve accreditation; the second Tribal Nation public health department receive accreditation; as well as one state health department and a total of seven local health departments. We congratulate all of them for their hard work and their mutual commitment to meeting national standards."

Congratulations, Fort Riley Department of Public Health!

## NACCHO Model Practices Awards Program – Deadline December 12

by NACCHO

The National Association of County & City Health Officials (NACCHO) is now accepting applications for the 2018-2019 Model Practices Program. The program honors and recognizes outstanding local health initiatives from across the nation and shares and promotes these practices among local health departments through the Model Practice Database.

A [recording of a webinar](#) on the application process is available online. There is no limit to the number of awards given. Online submissions must be submitted by 10:55p p.m. on December 12. Online applications can be submitted [online](#). Additional information about the program can be found on the [Model Practices webpage](#) or by contacting [practices@naccho.org](mailto:practices@naccho.org).



# Federal and State Agencies Address Rising Use of E-cigarettes

by Kansas Department of Health and Environment



Kansas, along with the rest of the nation, is experiencing an increase in the use of e-cigarettes among youth. The Kansas Department of Health and Environment (KDHE), along with its partners, seeks to raise awareness of the potential harm to those who use this product. According to the 2017 Kansas Youth Risk Behavior Survey, one in 10 (10.6 percent) high school students in Kansas currently use e-cigarettes. And national data show that e-cigarette use among youth increased from 1.5 percent in 2011, to 11.7 percent in 2017. E-cigarettes are now the most commonly used tobacco product among U.S. youth.

Recently, the Centers for Disease Control and Prevention (CDC) released an analysis of retail e-cigarette sales data from 2013-2017. It shows that sales of JUUL, an e-cigarette shaped like a flash drive, grew more than seven-times from 2016 to 2017, and JUUL Laboratories held the greatest share of the U.S. e-cigarette market by December 2017. In September, the Food and Drug Administration (FDA) announced the issuance of more than 1,300 warning letters and fines to retailers that illegally sold JUUL and other e-cigarette products to minors.

“Youth use of e-cigarettes is concerning because e-cigarettes often contain nicotine, and nicotine exposure during adolescence can cause addiction and can harm the developing brain,” said Dr. Greg Lakin, Chief Medical Officer, KDHE. “JUUL products contain particularly high levels of nicotine.”

The U.S. Surgeon General concluded in a 2016 report that the use of tobacco products containing nicotine among youth, including e-cigarettes, is unsafe. E-cigarettes produce an aerosol that generally contains fewer toxic chemicals than secondhand smoke from cigarettes. However, it can contain many harmful and potentially harmful substances, including nicotine, heavy metals like nickel, tin and lead, volatile organic compounds, and cancer-causing chemicals. Because e-cigarettes have risen in popularity so quickly, the long-term effects and dangers of inhaling the aerosol from e-cigarettes are still relatively unknown.

The 1998 Master Settlement Agreement (MSA) imposed restrictions on tobacco industry marketing, specifically on advertising targeting youth. Exposure to tobacco product advertising has been shown to influence young people to start using tobacco products. E-cigarette companies, however, were not included in and are not restricted by the MSA. E-cigarette companies are using techniques identical to those used by tobacco companies that have been shown to increase use of cigarettes by youth, and research shows they have been successful in their attempts to reach youth. The 2016 National Youth Tobacco Survey found that 78.2 percent of middle and high school students had been exposed to e-cigarette advertisements from at least one source.

E-cigarettes are not one of the seven medications approved as a “quit smoking” aid by the FDA. The U.S. Preventive Services Task Force concluded that there is not enough evidence to recommend e-cigarettes for smoking cessation in adults. Many adult e-cigarette users do not stop smoking cigarettes and instead transition to dual use of both cigarettes and e-cigarettes. In 2016, more than half (56.1 percent) of Kansas adults who currently use e-cigarettes were also current cigarette smokers.

The U.S. Surgeon General concluded in a 2016 report that actions should be taken at the national, tribal, state and local levels to address and prevent e-cigarette use among youth and young adults. One of these recommended actions is engaging youth in comprehensive community and statewide tobacco control programs. **Resist** is a statewide youth-led tobacco prevention initiative that seeks to change youth perceptions of tobacco use, reduce youth exposure to tobacco products and reduce tobacco use rates in Kansas. **Resist** is sponsored in part by KDHE. For a complete list of resources on e-cigarettes and other tobacco products impacting Kansas youth, please visit <http://www.kdheks.gov/tobacco/youth.html>.

## Statewide Assessment of Infant Toddler Services

by Chris Tilden, Research Project Coordinator, KU Center for Public Partnerships & Research

Developmental screening during early childhood helps identify children who may be at risk for developmental delays, and can help ensure that children and families receive timely services and support. In concert with the Kansas Department of Health and Environment and other partners, the KU Center for Public Partnerships and Research (CPPR) is gathering information about early childhood developmental screening. A brief (10 minute or less) survey is available: [www.bit.ly/devscreen](http://www.bit.ly/devscreen). If you conduct developmental screening, CPPR wants to hear from you. Your feedback will be an essential part of a first-ever, comprehensive, statewide assessment of Infant Toddler Services that will inform planning efforts among stakeholders at the local and state level to effect positive system change. Please contact Chris Tilden at [ctilden@ku.edu](mailto:ctilden@ku.edu) with any questions about the assessment.

## Make Safety a Tradition in Your Holiday Kitchen

by Safe Kids Kansas



For many families, the holiday season includes cooking or baking traditional foods in the kitchen. With a few simple safety steps, children can join in the fun and make memories for a lifetime.

“When kids are in the kitchen, supervision is key,” said Cherie Sage, Safe Kids Kansas (sponsored in part by the Kansas Department of Health and Environment). “Whether helping an adult cook or simply watching, children should always be in sight and in reach at all times. If you will be busy with preparations, ask another adult or teenager to watch the children as they perform age-appropriate tasks.”

Burns—from spills, steam, hot surfaces and flame—can be especially devastating injuries. Because young children have thinner skin than adults,

they burn more severely and at lower temperatures. Scald burns from hot liquid or steam are the most common type of burns among children ages 4 and under. A child will suffer a full-thickness burn (third-degree burn) after just three seconds of exposure to 140-degree water.

Safe Kids Kansas recommends these precautions against kitchen burns:

- Keep children within eyesight of a hot stove. Unattended food on the stove is the number one cause of home fires.
- Never hold a child while cooking or carrying hot items.
- Cook on back burners whenever possible and turn all handles toward the back of the stove.
- Wear close-fitting clothing in the kitchen.
- Keep hot foods and liquids away from the edges of counters and tables. Be especially careful around tablecloths—children can pull hot dishes down onto themselves.
- Tie up the electrical cords of small appliances. A toddler playing with a dangling cord can pull a toaster or microwave down from a countertop.

In addition to hot surfaces, hot liquids and sharp objects, the other major hazard in the kitchen is poison. Store potential hazards, such as cleaning products and alcohol (including many baking extracts), in locked cabinets out of reach. Also, install a carbon monoxide detector to alert everyone to get out of the house if there is a buildup of the odorless toxic gas given off by fuel-burning appliances.

Children who can follow directions may be ready to help in the kitchen with tasks that do not involve knives, appliances or heat. Some examples of child-friendly tasks include: tearing lettuce, rinsing fruits and vegetables under cold water, stirring ingredients in a bowl, using cookie cutters, measuring dry ingredients or cutting soft fruits with a butter knife.

“You know your own children. Don’t give them knives or let them handle anything hot until you know they have the maturity and coordination to do it safely,” said Sage. “Some children mature faster than others, so it’s up to parents to use good judgment about each child’s capabilities.”

For more information about safety and burn prevention, visit [www.safekidskansas.org](http://www.safekidskansas.org).



**FUNDING**

**PROJECTS**

## Funding Opportunities

### Climate and Health Adaptations in Local Health Departments – Deadline December 14

The National Association of County and City Health Officials (NACCHO) is offering a funding opportunity for local health departments to supplement ongoing climate change and health adaption initiatives. NACCHO supports local efforts to track, prevent, and mitigate the health effects of climate change. NACCHO supports implementing existing policies and procedures (e.g., CDC BRACE framework) and integrating climate change into ongoing performance improvement measures (e.g., Public Health Accreditation).

NACCHO, with support from the Centers for Disease Control and Prevention (CDC), intends to award up to two entities with a maximum of \$15,000 each. The purpose of this funding is to supplement ongoing climate change and health adaptation initiatives in local health departments. Applicants can apply for up to \$15,000 in funding for projects and activities supporting community resilience to climate change. Up to two awards of \$15,000 each will be available for work starting January 2, 2019. The performance period for this award is January 2, 2019 – July 31, 2019.

The deadline for applications is December 14. For questions regarding this funding opportunity, please contact Grace McClain at [gmcclain@naccho.org](mailto:gmcclain@naccho.org). Additional information is available on NACCHO's website.

### Strong Systems, Stronger Communities – Technical Assistance for Performance Improvement – Deadline December 21

The National Association of County and City Health Officials (NACCHO), with support from the Center for State, Tribal, Local, and Territorial Support (CSTLTS) within the Center for Disease Control and Prevention (CDC), is offering a new technical assistance opportunity, “Strong Systems, Stronger Communities” (SSSC) TA Cohorts. SSSC will support local health departments (LHDs) in completing public health performance improvement projects through a tailored training and TA program. While no monetary awards will be given, SSSC will provide training and technical assistance to up to eight LHDs, including an in-person training in Washington, DC. Through the SSSC TA cohorts, NACCHO aims to help LHDs and communities use performance improvement methods and tools to improve population health and address the social determinants of health across the local public health system. SSSC TA Cohorts will focus on two categories of work:

- Quality improvement (QI) activities to improve population health
- Addressing the social determinants of health (SDoH) through the community health improvement planning (CHIP)

NACCHO and CDC will host an optional webinar on Tuesday, December 11, 2-3 p.m. to provide an overview of the request for proposals (RFP) and application. No new information will be shared during the call; as such, applicants need not wait for this optional call to begin or submit applications. NACCHO is asking those who plan to attend the webinar to register in advance. A recording will be posted online two days following the event. For the full RFP and application, please visit NACCHO's Performance Improvement Technical Assistance webpage.



## Environmental Justice Small Grants Program – Deadline February 15



The United States Environmental Protection Agency (EPA) has announced a funding opportunity through the Environmental Justice Small Grants (EJSG) Program. The EJSG Program provides funding directly to community-based organizations for projects that help residents of underserved communities understand and address local environmental and public health issues. The funding supports *community-driven* projects designed to engage, educate, and empower communities to better understand local environmental and public health issues and develop strategies for addressing those issues, building consensus in the community, and setting community priorities.

For purposes of this announcement, the term "underserved community" refers to a community with environmental justice concerns and/or vulnerable populations, including minority, low income, rural, tribal, indigenous, and homeless populations that may be disproportionately impacted by environmental harms and risks.

Community-driven projects are projects that include activities where community residents and/or representatives are integrally involved in the thinking behind and execution of those activities. Therefore, applying organizations should have a direct connection to the underserved community impacted by environmental harms and risks.

The current opportunity will place special emphasis on proposals in the following areas:

- Projects that address the needs of communities that have been adversely impacted or are likely to be adversely impacted by natural disasters, including, but not limited to, hurricanes, tornadoes, wildfires, floods, and earthquakes
- Projects that include the needs of US military veterans and/or homeless populations
- Proposals submitted by eligible organizations that have not received an Environmental Justice grant award in the last 6 years
- New applicants to the Urban Waters Program

Previously funded projects include:

- Empowering farm workers to overcome pesticide-related environmental and health challenges in Pennsylvania
- Providing healthy home assessments for environmental hazards in homes of families with children under the age of 12
- Promoting environmental justice, public health, and climate resiliency in response to coal mining projects in a native village in Alaska

Technical assistance calls regarding this grant opportunity will be held throughout December and January. One-hour calls will be held on December 13 at 2:30 p.m., January 16 at 1 p.m., January 23 at 3 p.m. and January 31 at 6 p.m. To participate in a call, dial 866.299.3188 and use the access code of 202-564-6349#.

The EPA expects to award 50 grants for up to \$30,000 per grant. For additional information on eligibility, ineligible activities and funding requirements, view the [Request for Proposals](#) or view the [program website](#). Questions regarding this funding opportunity can be sent to [Moses.Althea@epa.gov](mailto:Moses.Althea@epa.gov).

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## Health in All Policies Funding Opportunity – Deadline December 13

The [National Center for Healthy Housing](#), in collaboration with the **National Environmental Health Association**, the **National Association of County and City Health Officials**, and the **Association of State and Territorial Health Officials**, is offering a new funding opportunity for local governmental agencies housing their jurisdiction's childhood lead prevention programs (i.e., local health departments, local environmental health agencies).

The funding will support agencies to implement a [Health in All Policies](#) (HiAP) strategy as part of their lead prevention implementation program and activities. Examples of sponsored activities include building or enhancing a lead coalition and setting up joint meetings with partners to increase screening and case management.

Up to three entities will be awarded a maximum of \$20,000 each, as well as technical assistance from the national partners along the way. Online applications must be submitted by Thursday, December 13, at 4:00 p.m. **Find additional information and apply for this funding opportunity [here](#).**



## Rural Communities Opioid Response Program – Planning Grant – Deadline January 15

Health Resources & Services Administration (HRSA) is accepting applications for the Rural Communities Opioid Response Program – Planning (RCORP-Planning). The purpose of this funding opportunity is to support treatment for and prevention of substance use disorder, including opioid use disorder (OUD), in rural counties at the highest risk for substance use disorder.

The overall goal of RCORP-Planning is to reduce the morbidity and mortality associated with opioid overdoses in high-risk rural communities by multi-sector consortiums planning to strengthen their organizational and infrastructural capacity to address one or more of the following focus areas at the community, county, state, and/or regional levels:

- *Prevention*: reducing the occurrence of opioid use disorder among new and at-risk users, as well as fatal opioid-related overdoses, through activities such as community and provider education, and harm reduction measures including the strategic placement and use of overdose reversing devices, such as naloxone, and syringe services programs; (See page 20 for additional information)
- *Treatment*: implementing or expanding access to evidence-based practices for opioid addiction/OUD treatment, such as medication-assisted treatment (MAT) including developing strategies to eliminate or reduce treatment costs to uninsured and underinsured patients; and
- *Recovery*: expanding peer recovery and treatment options that help people start and stay in recovery.

*This funding opportunity will support one year of planning funding.* There will be additional funds available in the future to provide continued support for implementation and evaluation activities, including additional awards and National Health Service Corps (NHSC) Loan Repayment Program awards.

Therefore, RCORP-Planning award recipients are encouraged to cultivate strong county, state, and regional-level partnerships and to incorporate workforce recruitment and retention needs and efforts into planning and capacity building activities throughout the period of performance. For example, RCORP-Planning award recipients can use funds to ensure that health care organizations obtain eligibility for placement of rural NHSC clinicians in future years.

While this award provides one year of planning funding, HRSA envisions that these consortiums will work towards becoming operational and sustainable beyond the project year, and that they will have achieved levels of efficiency and service integration and coordination to implement multi-county or state OUD prevention, treatment, and recovery initiatives. It is expected that consortiums will develop plans to ensure that services provided to the target population are affordable and accessible. Therefore, RCORP-Planning award recipients are also encouraged to leverage and coordinate their OUD activities with other federal, state, and local OUD resources during the period of performance.

Eligible applicants include all domestic public or private, non-profit or for-profit, entities, including faith-based and community-based organizations, tribes, and tribal organizations, who will serve rural communities at the highest risk for substance use disorder, who meet the RCORP-Planning specifications for the Applicant Organization and Consortium as described within the [Notice of Funding Opportunity \(NOFO\)](#).

The applicant organization may be located in an urban or rural area, but all planned activities supported by this program must exclusively target populations residing in HRSA-designated rural counties or rural census tracts in urban counties and the consortium overall must be representative of rural entities.

Additional information about the eligibility requirements and this funding opportunity is available in the [NOFO](#). Questions about the funding opportunity should be addressed to Kiley Diop at [kdiop@hrsa.gov](mailto:kdiop@hrsa.gov) or (301)443.6666.

## Vector Control Collaborative: Request for Applications – Deadline December 21

The National Association of County & City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC) have established the Vector Control Collaborative to match local vector control programs that have demonstrated expertise in core capabilities with vector control programs looking for guidance, tools, and recommendations to build program capabilities. NACCHO intends to award up to six entities with a maximum of \$20,000 each to form mentorship pairs that will improve participant capacity to address vector-borne diseases, with an emphasis on mosquito and tick-borne disease prevention. Applications are due December 21. Additional information and applications are [available online](#).



## News & Resources

### Rural HIV/AIDS Prevention and Treatment Toolkit

The Rural HIV/AIDS Prevention and Treatment Toolkit compiles evidence-based and promising models and resources to support organizations implementing HIV/AIDS prevention and treatment programs in rural communities across the United States.

The modules in the toolkit contain resources and information focused on developing, implementing, evaluating, and sustaining rural HIV/AIDS programs. Access the toolkit [online](#). There are more resources on general community health strategies available in the [Rural Community Health Toolkit](#).

### Resource – Identifying Health Literacy Needs

The more you know about your audience, the better you can reach them with messages about their health. The Centers for Disease Control and Prevention (CDC) offers a number of resources to identify your audience's needs and communicate effectively on the webpage [Understanding Your Audience](#). The webpage offers surveys and other tools to measure people's literacy, numeracy, and their experiences with healthcare. These studies can be used for research ideas, evaluation questions or benchmarks for your own results. Resources and tools are also provided on the webpage to increase organizations' communication effectiveness by recognizing and bridging cultural differences that may contribute to miscommunication. Additionally, the webpage includes a section providing tools and resources to help public health professionals improve their communication with older adults by focusing on health literacy issues.

### CDC Digital Media Toolkit for the 2018-19 Flu Season

The Centers for Disease Control and Prevention (CDC) developed a [digital toolkit](#) to assist public health professionals in communicating about the importance of vaccination. The toolkit includes details on events/activities, sample social media and newsletter content, graphics, web assets, and media prep material. This material is downloadable, shareable, and some of the material is customizable. View the [full toolkit](#) online.



## Job Postings

**Geary County Health Department**

Health Department Deputy Director

**Harper County Health Department**

Full Time Attendant Care Provider

**Harvey County Health Department**

Community Health Nurse

**Hodgeman County Health Department**

Health Department Staff Nurse (RN)

**Riley County Health Department**

Clerical Assistant – Part Time

Public Health Nurse – Clinic

**Sedgwick County Health Department**

PT WIC Breastfeeding Peer Counselor

Fiscal Associate

Nurse Coordinator

**Shawnee County Health Department**

Health Information Management Systems  
Specialist

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## NACCHO's 2018 Forces of Change Report Available

The National Association of County & City Health Officials (NACCHO) has recently published its Forces of Change survey report. The Forces of Change survey assesses the impact of a variety of trends affecting change in local health departments (LHDs). The survey included six topics: Budget Cuts and Job Losses, Response to Opioid Use and Abuse, Population Health Activities, Influenza Preparedness and Response, Informatics Capacity, and Environmental Health Activities. In 2017, approximately two-thirds of LHDs implemented activities related to addressing the opioid crisis. Additionally, the survey found that LHDs are increasing their work in population health. According to the survey, LHDs indicated service reductions in emergency preparedness. The report also includes information about LHDs use of informatics, budget cuts and job losses, and response to the 2017-2018 influenza season. You can find the report on NACCHO's [website](#).



## Webinar – Building a Culture of Quality with NACCHO's Organizational Culture of Quality Self-Assessment Tool Version 2.0 - December 13

Join staff from the National Association of County & City Health Officials (NACCHO) for a webinar to learn about the new Organizational Culture of Quality Self-Assessment Tool Version 2.0 (QI SAT 2.0) on December 13, 12 p.m. With 59 diagnostic statements, discussion questions, and suggested transition strategies, the QI SAT 2.0 enables organizations to objectively assess quality culture, identify opportunities for improvement, and prioritize strategies for inclusion in a quality improvement (QI) plan. NACCHO will highlight the revisions reflected in the QI SAT Version 2.0, suggest processes for conducting the QI SAT and incorporating results into QI Plans, and provide an overview of the QI SAT 2.0 Toolkit, which includes staff and leadership versions of the assessment, a facilitation guide, a scoring spreadsheet, and PowerPoint slide decks for introducing the assessment to staff and facilitating group scoring and discussion. You can download all of these tools at <http://qiroadmap.org/assess/>. Register for the webinar [here](#).

## Hear it Now: TFAH's Webinar Series on Achieving Health Equity through Collaborations, Innovative Funding and Leadership

Trust for America's Health's four-part webinar series, *Taking Action to Promote Health Equity – Using the Lessons from Cutting-Edge Practices to Improve Health and Well Being*, is now online. The series featured some of the most insightful people from public health, philanthropy, government, academia, advocacy, and nonprofit- and community-based organizations, sharing their experiences shaping and executing diverse approaches to advance health equity. The webinar series was designed to inform a broad, national audience about compelling and replicable health equity initiatives and how to address the grass roots issues that will impact their success. The lessons learned are transferable to diverse communities – large or small, urban or rural, with substantial or minimal resources.

The series was produced by TFAH in partnership with and support from The California Endowment, the W.K. Kellogg Foundation, and the Robert Wood Johnson Foundation.

You can access the entire recording of the series [here](#) and specific ones below.

- [Segment 1 – Lessons Learned from The California Endowment's Building Healthy Communities Project](#)
- [Segment 2 – Show Me the Money – Innovative Funding](#)
- [Segment 3 – Breaking Out of the Box – Innovative Collaborations](#)
- [Segment 4 – Creating Change Through Leadership: Two Extraordinary Leaders, a Mother and Daughter, Share their Experiences Promoting Racial Equity](#)